

RENOVATING MIDWIFERY

CARE:

THE COMPLEXITY OF

ORGANISATIONAL CHANGE FOR

MIDWIVES

IN VICTORIA, AUSTRALIA

by

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**A Professional Doctorate submitted in partial fulfilment of the
requirements for the degree of**

DOCTOR OF MIDWIFERY

**UNIVERSITY OF TECHNOLOGY, SYDNEY
2009**

CERTIFICATE OF AUTHORSHIP / ORIGINALITY

I certify that this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged.

In addition, I certify that all information sources and literature used are indicated in the thesis.

Signature of candidate



ACKNOWLEDGEMENTS

There are many people that I would like to acknowledge and thank for their support, advice and guidance throughout my professional doctorate journey. First and foremost I would like to thank those midwives who took the time to share their experiences with me. I hope that changes that are continuing in maternity service organisation in Victoria provide a choice of midwifery practice to suit you all.

Special thanks go to my supervisors Professor Caroline Homer and Associate Professor Lin Lock who have encouraged, guided and kept me on track over months of writing and rewriting. Caroline in particular, thanks for your challenges to my ideas, suggestions and critique of my writing all of which contributed to the completion of this thesis.

My heartfelt thanks go to Trevor my husband, for his patience and understanding. Without the support and encouragement of my family I would never have made it this far. The computer is now free to be used by one and all and I look forward to participating once again in the gardening. I must acknowledge and thank my parents who always believed in my ability to achieve what I set out to do. The only sadness I have is that my mother died at the beginning of this journey and my father at the end but I know they were proud of all my achievements and that is what counts.

To my daughter-in-law Emma thanks for your valued editorial advice. Hopefully you learnt a little about midwives and midwifery as you proof read this document. As we enter the next stages of our lives, you to become a mother and me a grandmother you will be glad to hear that I will now have time to baby sit.

Finally, I would like to thank all my friends, work colleagues and fellow students for their support, suggestions and words of encouragement that have all been much appreciated.

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ABSTRACT

The importance of the role of the midwife in providing safe, quality care for women has until recently, been underrated in Victoria, Australia. Acknowledgement of the need for midwife-led models of care in state maternity service policies provided opportunities for midwives to become recognised within the healthcare system and the wider community. This professional doctorate aims to examine the ways in which the role of the midwife and her¹ practice has been impacted on by organisational renovations of midwifery care. It identifies the complexity of the factors that affect the midwife's ability or choice to work in midwife-led models of care. Furthermore this doctorate highlights the need for ongoing debate into midwifery in Australia.

Concepts related to midwifery practice are examined as they form the foundations for the research and policy components of the portfolio. This includes an exploration of midwifery philosophy, the antecedents to autonomous practice and the experience midwives have of midwife-led care. An examination of the concepts of continuity of care and woman-centred care provides a platform upon which to review models of midwifery care. This review highlights the development of an ongoing relationship as a source of satisfaction for midwives and women.

The second part of the doctorate reviews policies that guide the provision of maternity services in Victoria. Analysis of these policies using Kingdon's multiple streams framework identifies the problems, the political actors and the policy developed, establishing the context for organisational change in maternity care. The antecedents for successful integration of organisational change are explored through a review of change theory and leadership.

A case study approach utilised for the research component of the doctorate provides insights into organisational change that occurred at two maternity sites in Victoria. The findings of the study suggest there was a dichotomy between those midwives desiring autonomous practice and wanting to work in midwife-led care and those wishing to remain in one specialised area. Recommendations stemming from these findings

¹ The feminine pronoun will be used throughout the portfolio as 99% of midwives in Australia are women. This is not meant to discriminate against male midwives.

include the need for sufficient education and support during change, a review of terminology used to describe midwifery models of care and research into the use of integrated maternity units.

Complexity science is examined in order to bring the different strands of the doctorate together, providing an explanation for the different outcomes that occur despite the implementation of similar models. The connective leadership model was suggested as the means to provide leadership that is inclusive of providing direction, mentoring new leaders and providing support and opportunities for midwives to become empowered to practice autonomously. Attention to the complexity of organisational change is vital to ensure the future of midwifery.